



2024 Application Cover Sheet

This form must accompany your proposal, which must be either emailed to grants@jerrymetcalfmontana.org by 11:59 p.m on March 27, 2024 or mailed to us at PO Box 823, Helena MT 59624. Please type or print. Only *complete* applications will be accepted. Make sure to read the application instructions on our website.

Name of Applicant _____

Address _____

City _____ State _____ Zip _____

Contact Person: _____ Phone _____

E-mail Address: _____

Organization description and/or applicant biography:

Please check one of the following:

501(c)(3) (if yes, please enclose copy of IRS Verification letter.)

Exempt governmental unit (please specify) _____

Other (please specify) _____

Amount requested from JMF: \$ _____ Total project cost: \$ _____

Project period: _____ to _____

Are you asking for funds for this project for more than one year? Yes No

If this is a multi-year request, tell us

How many years? _____ How much money per year? _____

Please specify any other funding sources that you have applied for or received for this project (From whom? How much requested? How much committed? Will our grant match other funds?):

Signature _____ Title _____ Date _____